

Q: will AHCCCS provide a list of covered NDCs for billing?

A: No, AHCCCS will not be providing a list of covered NDCs.

The web page for Pharmacy has the 3 formulary lists:

- AHCCCS FFS Drug List, Acute and Long Term Care
<https://www.azahcccs.gov/Resources/Downloads/PharmacyUpdates/AHCCCSFFS.pdf>
- AHCCCS FFS Formulary for Dual Eligible
<https://www.azahcccs.gov/Resources/Downloads/PharmacyUpdates/AHCCCSDualFormulary.pdf>
- AHCCCS FFS Behavioral Health Drug List
<https://www.azahcccs.gov/Resources/Downloads/PharmacyUpdates/AHCCCSBehavioralHealthDrugList.pdf>

Q: Can we bill AHCCCS for covered NDCs as secondary coverage?

A: If the primary coverage is a health plan or TPL, then the UB04 claim submitted to AHCCCS must follow the NDC billing requirements and the billing requirements for other plan's payment.

If the recipient is eligible for Medicare Part D coverage then only those medications indicated on the Formulary for Dual Eligible (link above) can be submitted to AHCCCS.

AHCCCS is prohibited from reimbursing Part D covered medications and the Part D deductible/copay.

Q: Can we bill the pharmacy claim using the ICD-10 diagnosis code for 'refill of repeat prescription'?

A: Yes "encounter for issue of repeat prescription for medicaments" is a valid diagnosis. However, AHCCCS encourages providers to use the most appropriate ICD-10 codes for the services.

AHCCCS recommends the provider include this in their testing files.

Q: Do the 837 files require revenue code 0519 on all claim lines or just the first claim line?

A: The revenue code 0519 must be on each line billed on the pharmacy claim.

Q: Is there an NDC for billing anti-coagulant therapy management pharmacy visit?

A: Anti-coagulant Therapy Management as a pharmacy service does not have an NDC.

AHCCCS has identified ICD-10 diagnosis codes appropriate when billing for this service:

- D6859 Other primary thrombophilia
- D6861 Antiphospholipid syndrome
- D689 Coagulation defect, unspecified
- D696 Thrombocytopenia, unspecified
- Z5181 Encounter for therapeutic drug level monitoring
- Z7901 Long term (current) use of anticoagulants

These ICD-10 diagnosis codes, when billed for revenue code 0519 specifically for the anti-coagulant therapy, will allow the pharmacy claim to pay the AIR without an NDC when no other covered pharmacy services are billed.

If other covered pharmacy services are also billed for the same DOS then the anti-coag service must be the last line billed on the UB-04 with revenue code 0519.

For further information refer to:

- the 4 NDC articles sent on ListServ June 2nd and 3rd, 2016
- NDC power point presentation from June 9, 2016 training session